## Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under whic provider is doing business): iMedix.com	h the servic
Address of Service Provider: 511 Avenue of the Americas Suite 641, New York,	, NY, USA
Name of Agent Designated to Receive	
Notification of Claimed Infringement: Anat Sneh	
Full Address of Designated Agent to which Notification Should be Sent (a or similar designation is not acceptable except where it is the only address that can be used in the glocation): 511 Avenue of the Americas Suite 641, New York, NY 10011-8436, USA	P.O. Box geographic
Telephone Number of Designated Agent: (646) 652-8694	
Facsimile Number of Designated Agent: (646) 514-5007	
Email Address of Designated Agent: dmca@iMedix.com	
Signature of Officer or Representative of the Designating Service Provider:  Date: Valy 10 44	2001
Telephone Number of Designated Agent: (646) 652-8694  Facsimile Number of Designated Agent: (646) 514-5007  Email Address of Designated Agent: dmca@iMedix.com  Signature of Officer or Representative of the Designating Service Provider: Date: Valy 10 14	2001

SCANNED 09 21-2007

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.



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